

South Dakota Board of Funeral Service
135 East Illinois, Suite 214
Spearfish, SD 57783

CREMATORY ESTABLISHMENT
LICENSE RENEWAL APPLICATION FORM FOR 2002
ALL LICENSES EXPIRE ON DECEMBER 31, 2001

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1. SDCL 36-26A requires renewal to be made prior to December 31 of each year.
 2. Send money order, certified check, bank draft or personal check of \$100.00 payable to South Dakota Board of Funeral Service at the above address.
 3. Please remember to notify the board of any change of address or ownership within thirty days.
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Crematory Name: _____ License Number _____

Address: _____
(mailing address) (City) (State) (Zip code)

Physical Address: _____
(street) City Zip

() Proprietorship _____

() Partnership _____

() Corporation _____

If Corporation: List both the name and address of 25% of the primary and subsidiary corporation and primary stockholders of each.

License Number: _____ Type of Structure: _____

Type of Equipment Used: _____

Crematory Telephone Number: _____

Printed name of person submitting renewal _____

Signature _____ Date _____

Board use ONLY:

Received _____ Check Number _____ \$ _____